Date://23	CITY OF GOODLETTS VILLE SPO	RTS PARTICIPATION WAIVE	<u>:R</u>
Player Name:	Team Name:	Phone: _	
Email:			

This document is a waiver of any claim you may assert against the City of Goodlettsville, its agencies, department, and employees ("Goodlettsville") because of any injuries you may suffer due to your participation in any League sport activities, which will be located in the City of Goodlettsville facilities. You fully understand and agree that in participating in the Activity and/or using the facilities, there is the possibility of accidental or other physical injury. You hereby release, waive, and disclaim any right, cause of action, right to bring a lawsuit, or any other legal claim against Goodlettsville that you, your personal representative or estate may have or may incur due to your participation in the Activity resulting in any form of injury to you or for any injuries suffered by you due to your misuse of the Facilities or injuries caused by other persons who are either participating in the activity and/or using the facilities. You also agree to indemnify Goodlettsville for any and all expenses, including a reasonable attorney's fee, incurred by Goodlettsville due to your bringing a suit against Goodlettsville for such injuries. You hereby recognize and acknowledge and agree that your participation in the Activity is at your own risk and you will be solely responsible for injuries you incur due to your participation in the Activity to be held on Goodlettsville Facilities and allowing you to participate in the Activity. You agree that this consideration is adequate compensation for this waiver.

If the player is a minor, the parents or guardians of the child are executing this waiver to release, waive, and disclaim any right, cause of action, right to bring a lawsuit, or any other legal claim against Goodlettsville that you, your child, your child's personal representative or estate may have or may incur due to your child's participation in the Activity resulting in any form of injury to your child or to your child's misuse of the Facilities or for injuries caused to your child by other persons who are either participating in the Activity and/or using the Facilities. You fully understand and agree that in allowing your child to participate in the Activity and/or to use the Facilities, there is the possibility that your child could suffer accidental or other physical injury. You hereby agree to indemnify Goodlettsville for any and all expenses, including a reasonable attorney's fee, incurred by Goodlettsville due to your bringing a suit against Goodlettsville for such injuries on behalf of your child. You hereby recognize and acknowledge and agree that your child's participation in the Activity is at your child's own risk and you will be solely responsible for injuries your child incurs due to his/her participation in the Activity. This waiver has been executed by you, in consideration of Goodlettsville allowing the Activity to be held on Goodlettsville Facilities and allowing your child to participate in the Activity. You agree that this consideration is adequate compensation for this waiver.

Signature below confirms player has read, understands and agrees to the stated release on the reverse page.

	Player Name (Print)	Player or Parent/Guardian Signature	DOB	Address (No PO Boxes)	City	Zip	Phone
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